

No. C115713	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct TIA (USA), LTD. ROBERT M KAPLAN PO BOX 4284 KETCHUM ID 83340		ROBERT K098 128 SADDLE RD KETCHUM ID 83340 3. Organized Under the Laws of: ID C115713																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																						
<table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>R. KAPLAN</td> <td>PO Box 4254</td> <td>Ketchum</td> <td>ID</td> <td>83340</td> </tr> <tr> <td colspan="6"> Sole officer & Director. </td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Pres.	R. KAPLAN	PO Box 4254	Ketchum	ID	83340	Sole officer & Director.					
Office held	Name	Street or P.O. Address	City	State	Zip																	
Pres.	R. KAPLAN	PO Box 4254	Ketchum	ID	83340																	
Sole officer & Director.																						
5.		6. Signature <u><i>Robert M Kaplan</i></u> Date <u>10/10/97</u> Name (Typed or Printed) <u>ROBERT M. KAPLAN</u> Title <u>PRES.</u>																				

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

6362